


Entered - 12/27/99 - sb  
CL99L0857 - DIANNE C. MITCHELL

00- *R* -1606

CLAIM OF: GARY SHUM,  
through his insurance carrier,  
Progressive Insurance Company  
P. O. Box 43256  
Richmond Heights, Ohio 44143

For damages alleged to have been sustained as a result of a vehicular  
accident on March 1, 1999 at 470 Armour Drive, NE.

THIS ADVERSED REPORT IS APPROVED

BY:   
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0857

Date: September 18, 2000

Claimant /Victim GARY SHUM  
BY: (Ins. Co.) Progressive Insurance Company  
Address: P. O. Box 43256, Richmond Heights, Ohio 44143  
Subrogation: X Claim for Property damage \$ 2,779.83 Bodily Injury \$           
Date of Notice: 12/17/99 Method: Written, proper X Improper           
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.)           
Date of Occurrence 03/01/99 Place: 470 Armour Drive, NE  
Department Police Division:           
Employee involved Caroline C. Fenimore Disciplinary Action: No Action Taken

NATURE OF CLAIM: The claimant failed to yield right-of-way to an emergency vehicle thus causing the accident. Furthermore, the claim as presented does not comply with the requirements of notice as set forth in O.C.G.A. §36-33-5, the six month statute of limitations expired prior to receipt of the claim.

### INVESTIGATION:

Statements: City employee          Claimant          Others X Written          Oral X  
Pictures          Diagrams          Reports: Police X Dept Report          Other           
Traffic citations issued: City Driver X Claimant Driver X  
Citation disposition: City Driver Dismissed Claimant Driver Dismissed

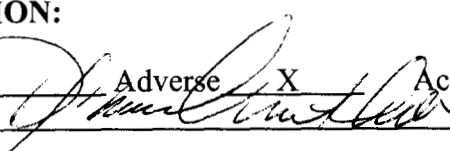
### BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial           
Improper Notice          More than Six Months X Other X Damages reasonable           
City not involved          Offer rejected          Compromise settlement           
Repair/replacement by Ins. Co.          Repair/replacement by City Forces           
Claimant Negligent X City Negligent          Joint          Claim Abandoned         

Respectfully submitted,

  
INVESTIGATOR - DIANNE C. MITCHELL

### RECOMMENDATION:

Pay \$          Adverse X Account charged: 1A01          2J01          2H01           
Claims Manager:  Concur/date 09-18-00  
Committee Action:          Council Action

**PROGRESSIVE**

P.O. Box 43258  
Richmond Heights, OH 44123  
progressive.com

Date:

5/28/99

COMPANY:

City of Atlanta

ADJUSTER:

Tricia Bezusek

FAX NO.:

(404) 658-7450

ENTERED - 12-27-99 - SB  
99L0857 - DIANNE MITCHELL

*Mitchell*  
*12/20/99*  
*AM*  
*over 6 mos*

Our Insured:

Our Claim No.:

Date of Loss:

Your Insured:

Your Claim/Policy No.:

Total Subrogation Balance:

(THIS FIGURE INCLUDES OUR INSURED'S \$ 500.00 DEDUCTIBLE)

Mary Shum  
9928583-670  
3.1.99  
City of Atlanta  
unk  
\$ 2779.83

Please take this letter as formal notice of our subrogation rights with regards to the above-captioned claim. We have completed our investigation into the facts of the above-captioned loss and find that your insured was the proximate cause of the accident.

Please make your draft payable to "Progressive Insurance, as subrogee of Mary Shum", in the amount stated above and mail it to the attention of the undersigned at your earliest possible convenience.

All supporting documentation is enclosed. I have diaried my file ahead fifteen (15) days. Thank you for your anticipated prompt attention to this matter.

PROGRESSIVE INSURANCE COMPANY

Trina Blake  
Subrogation Representative  
(440) 395-3143

00- -1606